Board of Zoning Appeals meetings are held every $2^{\rm nd}$ and $4^{\rm th}$ Tuesday of the month at 3:30 p.m. in the council chambers on the second floor.

COMPLETED APPLICATIONS ARE DUE TWO (2) WEEKS PRIOR TO MEETING. Applicant(s) will be notified if your application is scheduled on the agenda.

Office Use only	
Date Filed	
Pate of Meeting	

APPLICATION FOR A VARIANCE

CITY OF TROY BOARD OF ZONING APPEALS

(MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK)

		(Street Address) in a			
(P	arcel	Identification Number)	(Zoning District)		
		OWNER	APPLICANT		
Name		Name			
Address		Address			
City					
State		State			
The applicant is t			the property, which is subject to this application.		
The applicant is t	iic	(State the interest of the applicant)	the property, which is subject to this application.		
(OFFICE USE ONLY)		PLEASE PROVIDE THE FOLLOWIN	NG REQUIRED DOCUMENTS:		
EXHIBIT A	1.	Denied Zoning Permit Application: Application su which was denied by the Zoning Administrator. Attac			
EXHIBIT B	2.	Letter of Denial by the Zoning Administrator. Att	each as EXHIBIT "B"		
EXHIBIT C	3.	Site Plan: Actual dimensions of subject property according to recorded plat of such property. Also include the present zoning district, use, height, location and ground area of all existing and proposed buildings, off-street parking, vehicular entrances and exits, signs, landscaping, and any other uses appropriate for said variance. Attach as EXHIBIT "C"			
EXHIBIT D	4.	Property Owner List: Identify the city lot number for each property, the property owner's name, property address, and the <i>property owner's address</i> (this may be different from property address – check with the County Auditor tax list) of all contiguous properties beginning with the subject property (SEE EXAMPLE). NOTE: THE PROPERTY OWNER'S LIST AND MAP CAN BE OBTAINED FROM THE COUNTY PROPERTY TAX RECORDS (TAX MAPS). Attach as EXHIBIT "D"			
EXHIBIT E	5.	Property Owner Map: Identify on a map (using a sand all contiguous properties including those across an identify the names of the property owners, addresses, lesubject property (SEE EXAMPLE). Attach as EXHI	y street or alley. Using the "Property Owners List" ot numbers, and zoning districts beginning with the		
Copies	6.	Two (2) complete application sets (Exhibits A-E) in a r	reproducible format no larger than 11"x17"		
Labels	7.	One (1) set of mailing labels of the "property owners as	ddress"		
Map(s)	8.	One (1) copy of county tax map(s)			
Filing Fee	9.	Check issued to City of Troy for \$150.00			

PLEASE READ CAREFULLY AND ANSWER THE FOLLOWING ITEMS AS FULLY AS YOU CAN. USE SEPARATE SHEET(S) IF NEEDED. READ ATTACHED <u>SECTION 1137</u> OF THE ZONING CODE BEFORE COMPLETING APPLICATION.

(A) The particular requirements of this Zoni (For example, Section 1142.08 (f) (5) Rear Yard		vent the proposed use or construction.	
(B) The characteristics of the subject proper	rty which prevent co	ompliance with requirements of this Zoning Code.	
(C) The reduction of the minimum requiremuse or construction (List all variances reques	sted).	Code which would be necessary to permit the pro	posed
(D) The particular hardship, which would reapplied to the subject property (Unique cond	litions or physical in		
EXHIBITS PREPARED BY ME AND TRANS	SMITTED HEREWI	(Applicant S	
Subscribed and sworn to before me this	day of	, 20	
My Commission Expires			
	(Month/Date/Y	ear)	
		(Notar	
			y Public
	(Office Use Only - Do Not W	rite Below This Line)	y Public
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DISPOSITION OF BOARD OF ZONING APPEALS: Approved: Denied:	(Office Use Only - Do Not W	PUBLIC HEARING DATE	y Publid